



Repeal the Independent Payment Advisory Board (IPAB)

REQUEST

The National Association of Spine Specialists (NASS) urges Congress to repeal the Independent Payment Advisory Board (IPAB). We urge Representatives to cosponsor both H.R. 849 and H.J.Res. 51, introduced by Representatives Phil Roe, MD (R-TN) and Raul Ruiz, MD (D-CA). We urge Senators to cosponsor S. 251 and S.J.Res. 17 introduced by Senator Ron Wyden (D-OR) or S. 260 and S.J.Res.16, introduced by Senator John Cornyn (R-TX). Each of these measures would permanently repeal the IPAB.

BACKGROUND

Established by the Affordable Care Act as a tool to help control Medicare spending, the IPAB is a board of unelected government officials with little or no clinical expertise or the oversight required to protect access to care for our country's seniors. The IPAB has only one job: to cut billions of dollars from Medicare when spending exceeds a targeted growth rate. Even worse, if no board is appointed, which is the situation right now, the Secretary of Health and Human Services has the sole authority to make these decisions. IPAB is allowed broad authority to propose virtually unlimited changes to Medicare. Under a fast-track procedure, proposed spending cuts automatically go into effect unless Congress replaces the recommendations with cuts of equal magnitude, or unless blocked in the Senate by a three-fifths supermajority. Finally, although hospitals and long-term care facilities comprise over one-third of Medicare spending, they are exempt from IPAB cuts until 2020. This means that a disproportionate share of the burden will fall onto physicians, who make up less than 10% of total Medicare expenditures.

In any given year, Medicare spending could trigger IPAB payment cuts — posing a threat to health care access for the nation's 55 million Medicare beneficiaries. As designed, the IPAB is a blunt instrument that focuses on arbitrarily reducing what Medicare pays for health care services rather than on what's in the best interest of patients. These cuts would also have a potentially devastating impact on Medicare patients' access to innovative therapies and new care approaches. Additionally, the IPAB threatens to shift more health care costs to consumers and employers and could make it more difficult for physicians to see new Medicare patients. Finally, IPAB would usurp congressional authority over the Medicare program while granting unprecedented powers with virtually no oversight.

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